Workforce scheduling of patient care staff that include Registered Nurses, licensed practical nurses and patient care technicians, who provide dialysis treatments to patients is critical and complex for dialysis centres. The recent reforms and regulatory pressures in the industry don’t seem to help either. These regulatory reforms are forcing dialysis centres to revisit their margins and costs in an unprecedented manner. For instance, according to Nephrology News & Issues, the proposed rule for the 2014 End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) results in a profound cut in dialysis facility reimbursement that seems certain to threaten the quality of patient care at some facilities and endanger the viability of others. Briefly reviewing the proposed reform, NN&amp;I, winner of two Public Service Awards from the National Kidney Foundation, says the proposed rule implements 12% reduction in ESRD drug and biological reimbursement that was mandated by the American Taxpayers Relief Act of 2012 (ATRA); this, when adjusted by the annual market basket value for 2014, leads to an approximate 9.4% payment cut.

These external regulatory challenges are having more and more Dialysis Centres look internally to ensure outstanding patient experiences are balanced with considerable cost savings. It is in this context that labor costs, which account for more than 55% of overall dialysis centres’ spend become the corner stone for optimization.

Placing the right staff member in the right location at the right time and at the right price is complex and is often seen as a daunting task. By implementing a robust workforce management system, Dialysis Centres can yield substantial cost-saving opportunities while improving staff engagement and utilization.

Do you drive your car only using the rear-view mirror?

Most of the existing workforce management solutions for dialysis centres focus heavily on past data for staffing with available skillset, much like driving a car looking only at the rear-view mirror. These solutions lack intelligence, real-time dashboards and ability to pre-empt the use of overtime and overstaffing. Furthermore, these exiting Dialysis Centre
workforce management solutions do not help improve employee satisfaction and patient care. Also, they are incapable of ensuring 100% compliance to ever changing industry standards.

New generation workforce optimization software for dialysis centres need to be much more than a scheduling software that only extrapolates past data to fix present staff scheduling challenges.

Einstein II not only bridges this gap but goes above and beyond by helping dialysis centres proactively control workforce costs, standardize staffing process, optimize labor productivity, and simulate workforce scenarios for future staffing.

**Key Challenges for Dialysis Centres and how Einstein II can Help**

Dialysis Centre Administrators/ Directors, Nurse Managers and Charge Nurses at Dialysis Centres are finding it difficult to adjust staffing based on current and future volumes due to lack of data and effective decision making tools. Real-time dashboards in Einstein II can help monitor Centre-wide staffing status.

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Current Situation</th>
<th>How Einstein II Can Help</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor intensive scheduling</td>
<td>Managers spend an average 2-3 hours every day on staffing instead of focusing on patient care</td>
<td>Core schedule creation is automated in Einstein II helping Dialysis Centres reduce scheduling time by over 40%. Further, all scheduling rules are built</td>
</tr>
</tbody>
</table>
into our rules engine, thus ensuring standardized best practices across the organization.

Lack of transparency
Real-time open needs across the centre are not readily available, thus forcing one department to incur overtime while another sends employees home

Transparent horizontal and vertical views of all locations/departments in Einstein II enable Dialysis Centres to share resources between the same skill set and specialties.
Identifying the right staff with the right skill set at the right cost

In case of last-minute needs, schedulers rely on a short list of employees who are known to accept the shift whenever they are called.

Einstein II can recommend all employees who can be matched to a need along with the required data (OT hours, pay rate, etc) for informed decision making. Managers can communicate needs to all “eligible” employees and ensure that the most cost-optimized resource with the right skill set is scheduled to the open need.

Increasing regulatory requirements

Increased licensing requirements and restrictions on per-diem hours worked can pose significant

Einstein II can notify managers and employees of all regulatory requirements. The system can proactively restrict employees without the required credentials from being
compliance risks for Dialysis Centres scheduled. The system can also restrict scheduling per-diem employees beyond the cut-off hours to avoid paying benefits

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Skill</th>
<th>F/T Status</th>
<th>Credential Type</th>
<th>Credential Expiry Date</th>
<th>Applied For Expired</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee 1</td>
<td>RN</td>
<td>PT</td>
<td>License</td>
<td>10/05/2013</td>
<td>No</td>
</tr>
<tr>
<td>Employee 2</td>
<td>RN</td>
<td>PT</td>
<td>License</td>
<td>10/05/2013</td>
<td>No</td>
</tr>
<tr>
<td>Employee 3</td>
<td>PCT</td>
<td>PT</td>
<td>License</td>
<td>10/05/2013</td>
<td>No</td>
</tr>
<tr>
<td>Employee 4</td>
<td>RN</td>
<td>PT</td>
<td>License</td>
<td>10/05/2013</td>
<td>No</td>
</tr>
</tbody>
</table>

Automated warning messages sent to administrator and concerned employee on license expiry.

Real-time reporting to ensure that casual nurses work the required hours and weekend shifts.

Lack of data and models to predict future needs
Currently Dialysis Centres are forced to staff reactively and do not have adequate data to predict future volumes or plan for disasters
Based on historic trends, Einstein II facilitates scenario planning for various situations like
a) Opening new Centre
b) Increase or decrease in patient volumes
c) Disasters like Hurricane Irene
**Disparate data from multiple workforce management systems**

**Disparate systems results in labor intensive double entry and incongruent data, thus affecting decision making**

**Einstein II can be interfaced real-time with multiple workforce and patient care systems like:**
- Time & Attendance (for OT control)
- Tele Tracking (to help staff based on upcoming admissions, discharges, and transfers)
- Census system (to monitor required staffing levels as per census and HPPD)
- Payroll/ HR system (for updating employee profile)

Real-time interface helps ensure proactive staffing and seamless reporting for decision making.

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Workforce management or optimization solutions yield reduced costs, optimized business processes, improved employee satisfaction, and reduced turnover. These solutions provide an integrated and automated way to bring together silos of data, people, and processes for improved management.

Staff wages and benefits are the major expense driver for Dialysis Centres, with many hospitals expending more than 55% of their revenue on wages. With a changing reimbursement model, hospitals will need to become more flexible in their staffing to maintain competitiveness.